

Verdell E. Wallace  
Federal 32 Special

11/31

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.		FILING DATE			
							APPLICANT(S)					
							09/582486					
CLAIMS												
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			•		•		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	
1	1						51					
2	1						52					
3		1					53					
4	1						54					
5		1					55					
6		1					56					
7		1					57					
8		1					58					
9		1					59					
10		1					60					
11		3					61					
12	1						62					
13	1						63					
14		2					64					
15	1						65					
16		1					66					
17		1					67					
18		1					68					
19		1					69					
20		1					70					
21	1						71					
22		1					72					
23		2					73					
24		2					74					
25		2					75					
26		1					76					
27							77					
28							78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL D.	7						TOTAL IND.					
TOTAL EP.	19						TOTAL DEP.					
TOTAL AIMS	26						TOTAL CLAIMS					